
Assessment of Fidelity to the Housing First Principles of the HÁBITAT Programme

Roberto Bernad

RAIS. Hogar Sí

- **Abstract** *This article presents findings from a fidelity assessment of the Housing First Hábitat programme in Spain in its three initial sites, Madrid, Barcelona and Málaga. A fidelity self-assessment, qualitative interviews, and a focus group with key informants were conducted. Good fidelity was demonstrated in the Service Philosophy domain. Lower fidelity was observed in the Housing Process and Structure, Team Structure and Human Resources domains. Several barriers and facilitators to fidelity were identified. Barriers to clients' access to social and housing benefits and to community-based services were found at the systemic level. Lack of experience delivering Housing First and some aspects of the organizational culture were identified as barriers at the organizational level. Facilitators at the organizational level included the organization's vision and commitment of leaders and programme staff to the model. At the individual level, clients' and professionals' learning processes fostered adherence to the programme and facilitated adherence to Housing First principles. Implications of these findings for programme sustainability and fidelity are discussed, including lobbying activities to address systemic barriers, further separation of Housing and Support services, and support to team members.*
- **Keywords** *Homelessness, housing first, Spain, fidelity assessment, implementation science*

Introduction

The first Spanish Comprehensive National Strategy for the Homeless, approved by the Council of Ministers in November 2015, reported that there were approximately 33,275 homeless people in Spain. Approximately 23,000 of these individuals frequented the support services provided for homeless people, such as shelters and soup kitchens, while another 10,000 slept rough, according to night counts conducted in several municipalities across the country (MSSSI, 2016).

Historically, support services for the homeless population in Spain followed the *Continuum Linear Treatment* model (CLT). In this system, homeless people are offered a continuum of services beginning with low-threshold, emergency resources, progressing to more permanent housing and support services. Clients need to demonstrate their ability to meet increasing demands at the different steps in order to be considered “housing ready” (Nelson and Macleod, 2017).

The Spanish welfare system offers a wide array of public services to Spanish residents, including social, healthcare, education, and employment. Administratively, although the national ministries have input, the main responsibility for policy design and service provision is devolved to the 17 regions and to local governments. In practice, varying structures produce differences in access to public services across the different regions. The homeless services sector is composed mostly of small regional or local non-profit organizations. A few non-specialized state or multi-regional homeless organizations also operate in the country, such as the Red Cross, Caritas, and Saint John of God. Recently, several private companies were awarded tenders to deliver homeless services. RAIS, which runs the *Habitat Housing First* programme, is an exception in the sector because it is a specialized, private, state-level, non-religious, non-profit organization that has operated in the homelessness sector since 1998.

The main funding sources for homeless services in Spain, and in the social sector in general are: 1) regional or local tenders for the management of public services and 2) grants from several national, regional or local administrations. There is little philanthropic tradition in the country, although some private donors, corporate social responsibility schemes, and NGO members' fees provide some additional funding to some organizations. This funding structure is challenging for the sector because it is diverse (i.e., there are several small funders), unstable (i.e., grants have to be renewed annually), restricted in source (i.e., dependent mainly on public funding), and constricted (i.e., limited to the funding priorities and activities set by public authorities via calls of proposals). Dependence on public funding also limits organizations' lobbying and advocacy capacities because they have to do it

“against” their funders. Some umbrella organizations and networks have traditionally been key players in political dialogue, although the specific umbrella organization for homeless organizations in Spain dissolved in 2016 due to internal tensions.

All these elements have shaped homeless policies and services in Spain, which focus on managing homelessness instead of implementing the kinds of structural changes that could eventually end it. In general, homeless policies across Spain are still firmly rooted in paternalistic approaches that stem from the religious history of the social sector. Homeless services have traditionally addressed local emergency situations, provided for homeless people’s basic needs, and followed a staircase approach (Alemán, 1993).

Social housing and some types of housing subsidies are available at the state, regional, and local levels. However, homelessness is not an eligibility criterion for these support schemes, so people in a homelessness situation are not entitled to any housing support if they do not also belong to another vulnerable group. Moreover, there are long waiting lists for social housing, and it can take years for a person in homelessness to receive social housing. Taken together, these factors make it very difficult for a Housing First programme to grant immediate access to housing for any client or to mobilize the finances needed to maintain their tenancies.

Introduction of the Housing First Model into the Spanish Context

Around 2012, some social organizations began to advocate for the introduction of the Housing First model into Spain (Uribe, 2016). RAIS established a dialogue with the Ministry for Health, Social Services and Equality at the state level, and with several regional and local administrations, with the objective to launch a Housing First programme that could demonstrate its effectiveness in the Spanish context.

The resulting Housing First service run by RAIS was called *Hábitat* and opened in 2014 in the cities of Madrid, Barcelona, and Málaga (Bernad *et al.*, 2016a). *Hábitat* started with 28 housing units and one support team in each site. It was designed as a social experiment, as defined by the European Commission (EC, 2011), with a 24-month randomized trial evaluation, inspired by the successful outcomes of other Housing First demonstration programmes such as the *At home/Chez-soi* project in Canada (Goering *et al.*, 2014), *Un chez-soi d’abord* project in France (DIHAL, 2017) and the *Housing First Europe* project (Busch-Geertsema, 2014). In 2018, more than 300 clients received housing and support services from *Hábitat* in several cities in the regions of Galicia, Asturias, Basque Country, Aragon, Catalonia, Comunidad Valenciana, Balearic Islands, Andalusia, Canary Island and Madrid. The launch of the *Hábitat* programme, combined with ongoing advocacy work of a few other key

organizations, sparked several regional administrations' interest in implementing the model, which resulted in the first public Housing First service in the country, *Primer la Llar*, which was opened by the municipality of Barcelona in 2015.

Increased public awareness about homelessness policies and the debate around Housing First impacted on policy making too. In late 2015, the Council of Ministers approved the first National Strategy on Homelessness, in which Housing First appeared as one of the strategic lines for service provision. However, the regional governments are not obligated to implement the national strategy, nor do they receive any national funding to pay for its implementation.

Since Housing First was only recently introduced in Spain, very little research based on Housing First local practices has been completed. University researchers who are external to the Housing First programmes are currently evaluating both the *Hábitat* and the *Primer la Llar* Housing First programmes. At the time of writing, only one article had been published on the *Hábitat* programme (Bernad *et al.*, 2016b). Other preliminary outcomes of the *Hábitat* evaluation and findings of the fidelity assessment have been presented in international conferences in Madrid (Bernad, 2015, 2016c, 2016d, 2017). It is maybe worth noting that programme evaluation has never been one of the strengths of the Spanish social services system and, in fact, the introduction of Housing First in the country has brought a wider awareness of the need to generate evidence to inform policy-making processes.

In this context, RAIS identified the need to conduct a fidelity assessment of the *Hábitat* programme with the following objectives: 1) to encourage implementation of new Housing First Programs in Spain with high fidelity to Housing First principles, and 2) to identify and improve any areas of low model fidelity in the *Hábitat* programme. The fidelity assessment method proposed in the cross-country research allowed the identification of facilitators and barriers to programme fidelity at the systemic, organizational and individual levels (Aubry *et al.*, 2018). RAIS considered this research framework useful for the advocacy on social services and housing policies (systemic level), programme management (organizational) and service delivery (individual level).

Method

RAIS followed the fidelity assessment method used by the programmes participating in the cross-country research project (Aubry *et al.*, 2018). The assessment process was composed of the following steps: 1) translation and adaptation of the 36-item self-administered survey (Gilmer *et al.*, 2013); 2) administration of the self-assessment survey and analysis of results; 3) interviews with key informants, 4) coding of qualitative interviews and 5) analysis of results. The methodology followed

in the cross-country fidelity project received ethical approval from the University of Ottawa (Aubry, *et al*, 2018). Specific local ethical approval was not sought for the present research because it is not required for research on the social services sector in Spain.

Description of the Habitat Programme and Clients

Hábitat targets individuals with histories of chronic homelessness with high support needs. Eligibility criteria are: 1) being 18 years old or older; 2) being in a roofless situation at programme entry (ETHOS categories 1 and 2; see FEANTSA, 2005); 3) having a significant history of homelessness (e.g., 3 years in ETHOS 1, 2 or 3; or more than 1 year in ETHOS 1 or 2); 4) having one or several of the following concurrent social exclusion factors: a mental health issue (whether diagnosed by a doctor or as assessed by the clients' social worker), a substance abuse problem and/or a physical disability. At the time of the fidelity assessment, 38 clients (80% men, 20% women) were enrolled in the programme. On average, clients of the *Hábitat* programme were 48.5 years old and had been homeless 9.5 years. Most (72%) had a substance use problem; a smaller proportion had a mental health issue (40%) or a physical disability (29%).

Clients are referred to the *Hábitat* programme by local organizations that provide outreach or emergency services for people experiencing homelessness. An experimental group (its size is determined by the number of houses available in each city) and a control group (double the size of the experimental group) are constituted through a random assignment among all the referred cases which meet the inclusion criteria. The only requirements for clients to keep their housing and social support are: 1) accept at least one weekly visit by the HF team; 2) pay 30% of their income toward rent (if the person has no income, the programme will cover rent and basic needs such as utilities, food, and hygiene); 3) adhere to basic social norms in the neighbourhood; and 4) complete an evaluation interview every 6 months for two years.

Clients in *Hábitat* receive independent, scattered-site housing rented from the public or private housing market, depending on availability and on agreements with regional and local administrations. Support team configuration is based on the ICM model. Most team members are social workers, who link clients to the community-based services they need. Due to the lack of specialized housing associations and the structure of the organization, the support teams were originally in charge of both housing and support services. An alliance with the specialized housing association *Provienda* was established in 2016 to create stronger separation of housing and services. The housing outcomes for the initial group of clients, who accessed the programme between 2014 and 2015, showed that 100% of participants ($n = 38$) were housed in the programme on a regular basis for the past 24 months. Two

relocations occurred during that period; two people died; and one programme user moved into a rented room after 12 months but continued to receive support from the Housing First programme.

Initially, some people waited up to four months for housing after being told they were selected for the programme, which caused frustration and mistrust. Today, clients are not told they are accepted to the programme until one or several housing units are available. Usually, move-in occurs two weeks after clients are told they have been accepted onto the programme.

The fidelity self assessment

Procedure and Sample. The self-assessment survey was first translated from English to Spanish independently by four different native Spanish speakers with knowledge of the homeless sector. The translators compared and discussed the four Spanish versions at a conciliation meeting and agreed on a final version that best reflected the configuration of the Spanish welfare system and services. Discussions with Prof. Aubry and Prof. Greenwood, coordinators of the cross-country fidelity research and with the fidelity research teams which translated the survey into other European languages, and a pilot administration to two programme staff members contributed to the development of the final version of the survey. The Spanish-language version of the survey was shared with the research group and is available on demand by any individual or organization.

The survey was administered in the initial sites of the programme: Madrid in March 2016, and in October 2016 in Barcelona and Málaga. Each team member and site coordinator completed the assessment individually (Madrid $n = 4$; Barcelona $n = 3$; Málaga $n = 2$). Staff conciliation meetings facilitated by the research team were held independently in Madrid (April 2016), Barcelona, and Málaga (October 2016). In these meetings, an item-by-item review was conducted, and participants discussed differences in item ratings until a consensus was agreed and taken as the final rating for the item.

Data Analysis. Following the conciliation meetings, the item ratings were summed up to produce a score for each Housing First domain and a total fidelity score for each of the three sites independently. All the item ratings were converted to a 4-point scale following the more recent developments of the self-assessment methodology (Macnaughton *et al.*, 2015) and an average score for the three sites was calculated. Scores of 3.5 or higher on an item or domain indicate a high level of fidelity while scores below 3.0 are interpreted as reflecting a low level of fidelity.

The key informant interviews

Procedure and Sample. A focus group with key informants (n=3) and an individual interview (n=1) were conducted for qualitative assessment of the Madrid site in June 2016. For the Barcelona and Malaga sites, individual interviews were conducted with key informants (n = 6) either in person or by video-conference between December 2016 and January 2017. Key informants were selected to represent a range of roles within the organization and the Housing First programme.

The scores per item and per domain for each site were sent to all key informants two weeks before the sessions. In the interviews and focus groups, which were audio-recorded, the researcher followed the structured guide to discuss the scores provided by the cross-country research coordinators (Aubry *et al.*, 2017). Conversations explored factors identified as facilitators or barriers to programme fidelity.

Data Analysis. Following the procedures agreed for the cross-country project (Aubry *et al.*, 2018), the interview and focus group data were coded by the main researcher into two basic categories: 1) factors acting as facilitators or barriers and 2) factors at the systemic, organizational or individual level (Nelson *et al.*, 2014). This coding was then checked by two evaluation officers with knowledge of the *Hábitat* programme.

Results of the Assessment

Findings of the fidelity assessment

The quantitative findings from the self-assessment survey showed a moderate to high programme fidelity to the Housing First model. As seen in Table 1, moderate fidelity was observed in the domains of *Housing Process and Structure*; *Service Array*; and *Team Structure and Human Resources*. Lower scores in these domains included limited choice of clients in housing and decoration; barriers to housing subsidies; lack of a regular tenancy agreement and limited separation of housing and services; lack of peer support workers, poor support provided or lack of public services in some areas; lack of time in coordination meetings; and low client participation.

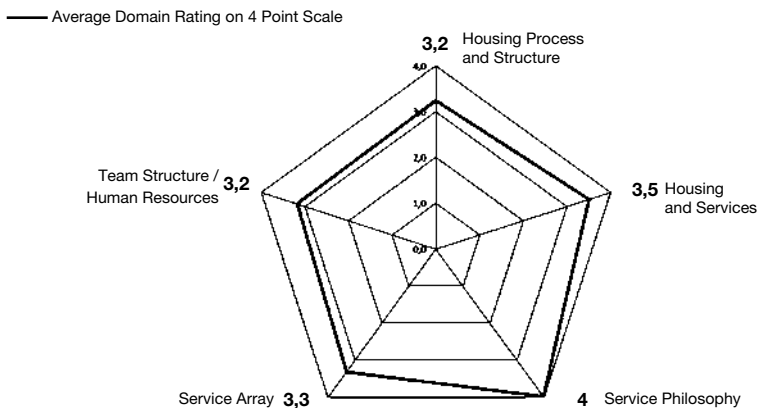
Table 1. Fidelity Assessment Item Scores and Domain Means Per Site and Average

Domain / Item	Domain Mean / Standard Item Score (Out of 4)			
	Madrid	Barcelona	Málaga	Mean 3 sites
<i>Housing Process and Structure</i>	4.0	3.1	2.6	3.2
1. Choice of housing	4.0	3.0	2.0	3.0
2. Choice of neighbourhood	4.0	3.0	2.0	3.0
3. Assistance with furniture	4.0	4.0	4.0	4.0
4. Affordable housing with subsidies	4.0	1.0	2.0	2.3
5. Proportion of income required for rent	4.0	3.0	1.0	2.7
6. Time from enrolment to housing	4.0	4.0	4.0	4.0
7. Types of housing	4.0	4.0	3.0	3.7
<i>Separation of Housing and Services</i>	3.1	3.1	3.7	3.5
8. Proportion of clients with shared bedrooms	4.0	4.0	4.0	4.0
9. Requirements to gain access to housing	4.0	4.0	4.0	4.0
10. Requirements to stay in housing	4.0	4.0	4.0	4.0
11a. Lease or occupancy agreement	4.0	2.0	4.0	3.3
11b. Provisions in the lease or agreement	2.7	4.0	4.0	3.6
12. Effect of losing housing on client housing support	2.0	4.0	2.0	2.7
13. Effect of losing housing on other client services	1.0	4.0	4.0	3.0
<i>Service Philosophy</i>	3.9	4.0	4.0	4.0
14. Choice of services	4.0	4.0	4.0	4.0
15. Requirements for serious mental illness treatment	4.0	4.0	4.0	4.0
16. Requirements for substance use treatment	4.0	4.0	4.0	4.0
17. Approach to client substance use	4.0	4.0	4.0	4.0
18. Promoting adherence to treatment plans	4.0	4.0	4.0	4.0
19. Elements of treatment plan and follow-up	3.6	4.0	4.0	3.9
20. Life areas addressed with programme interventions	4.0	4.0	4.0	4.0
<i>Service Array</i>	3.5	3.5	3.0	3.3
21. Maintaining housing	3.0	3.0	3.0	3.0
22. Psychiatric services	4.0	4.0	4.0	4.0
23. Substance use treatment	4.0	3.2	2.4	3.2
24. Paid employment opportunities	4.0	4.0	4.0	4.0
25. Education services	3.2	4.0	3.2	3.5
26. Volunteer opportunities	4.0	4.0	4.0	4.0
27. Physical health treatment	4.0	4.0	2.4	3.5
28. Paid peer specialist on staff	1.0	1.0	1.0	1.0
29a. Social integration services	4.0	4.0	3.2	3.7
<i>Programme Structure</i>	3.3	3.2	3.0	3.2
31. Client background	2.7	3.3	2.7	2.9
33. Staff-to-client ratio	4.0	4.0	4.0	4.0
34b. Frequency of face-to-face contacts per month	4.0	4.0	4.0	4.0
35. Frequency of staff meetings to review services	4.0	4.0	4.0	4.0
36. Team meeting components	3.3	2.7	2.0	2.7
37. Opportunity for client input about the programme	2.0	1.3	1.3	1.6
Total	3.6	3.5	3.3	3.4

High levels of fidelity (scoring 3.5 points or more on a 4-point scale) were found on 61% of the items while moderate (3.0 to 3.4) or low levels of fidelity (below 3.0) were found on 39% of the items. As illustrated in Figure 1, the five Housing First domains varied in their average fidelity scores, with the highest average scores being 4.0 for *Service Philosophy* and 3.5 for *Separation of Housing and Services*. The scores for the other three domains were 3.3 for *Service Array* and 3.2 for both the *Housing Process and Structure* and the *Team Structure/Human resources* domains.

Some variation in scoring was observed across sites, and the difference between the *Housing Process and Structure* scores in Madrid and Malaga is especially notable. The discussions in the consensus meetings suggested that participants in Madrid, whose office was in the RAIS headquarters building, answered those items with greater understanding of systemic barriers due to their knowledge of programmes' operations. Both the Madrid and Malaga teams identified similar barriers to *Housing Process and Structure*, but the Madrid team seemed to have greater insight into the challenges the organization faced in implementing the model. The Malaga team identified more barriers related to migrants' access to social or housing rights.

Figure 1. Average Housing First Fidelity Ratings by Domain (Mean rating calculated for the 3 sites)



The consensus meetings conducted during the self-assessment phase and the focus group and interviews during the qualitative assessment allowed the identification of barriers and facilitators for the fidelity of *Hábitat* to the original Housing First model as well as some key elements of the programme that have an impact on clients' recovery outcomes.

Findings from the key informants' sessions

Systemic facilitators and barriers

At a general level, political and social momentum in the years prior to the launch of the *Hábitat* programme facilitated the implementation. The emergence of two new parties in the political arena, combined with a strong social awareness about housing issues resulting from numerous high-profile evictions, fostered political openness to new solutions to homelessness. The visibility of the evictions crisis in the media and the rise of several relevant political figures linked to anti-eviction social movements around the country drew the media's attention to the issue of homelessness and to the *Hábitat* programme. All of these factors indirectly facilitated the programme's operations. For example, the municipality of Madrid sourced social housing units with the required characteristics to be allocated to the programme. Some professionals from community-based services developed an interest in the Housing First principles and began to collaborate with the programme teams.

Political forces and dependence on public funding are challenges to programme sustainability for many social services in Spain. *Hábitat* depends mainly on different public sources of funding or public housing entities, through grants or agreements, which must be renewed yearly in most cases, and are subject to political whims and pressures. As one of the site coordinators put it: "... the strategy is that the municipality progressively assumes the cost of the programme over time, and although we had their commitment two years ago, the fact is that they are not assuming it".

In all three sites, some of these pressures came from other organizations in the homelessness sector, which have advocated against RAIS or against the Housing First model in a fight to maintain the sector *status quo* and retain their funding. A key informant noted: "We cannot burst into this city saying: 'we are bringing in something better than what you have been doing, so give me money for that'", while another said: "There is not a culture of evaluation in the sector. If a City Council says: "this (Habitat's evaluation) is what should be done", they would be losing votes". These elements put constant pressure on the programme to ensure that the service will not be interrupted, and that risk management adopted by RAIS will not affect the recovery processes of clients.

Housing First's innovativeness and principles were identified as key motivations for adherence to the programme and commitment to the recovery process for clients and professionals. The sense of being offered a service completely different to the one traditionally delivered, in which clients are the main actors in their recovery process, was perceived as essential to the commitment of the service users to the service and to establish a trusting relationship with the intervention team. One key

stakeholder expressed it this way: “There is a great motivational element in this (programme). People can access a home for themselves, which you tell them is not limited in time, and that they have to accept very basic commitments for that”. On the professional side, team members felt motivated by being part of an innovative programme and felt more comfortable with a Housing First intervention approach over traditional services.

Key informants expressed that both the public and private social housing markets provide facilitating elements for programme adherence and recovery processes, but they also pose some barriers to programme implementation and for clients’ recovery. As in most of the European countries in which the Housing First model has been introduced, the housing market in Spain is tight and housing policies do not assure the right to housing in practice. This is, in fact, one of the main structural challenges for the *Hábitat* programme and for any other Housing First programme in Spain.

In terms of housing costs, one key informant said: “in many cases, the clients’ 30% income contribution would not even cover half of the rental, so their graduation from the programme seems unrealistic”. The public housing market is cheaper than the private housing market. For example, the average monthly rent in Madrid for social housing was around €200, compared to an average of €520 per month in the private market (Fotocasa, 2015), which in many cases can make the difference between clients being able to cover the monthly rent or not.

Professionals in the Madrid focus group also mentioned that landlords in the public market often have an altruistic attitude towards tenants and, therefore, they are usually more committed to clients’ recovery and more collaborative when difficulties arise. This also appeared as a barrier in some cases, since public housing landlords would be used to intervening in the recovery processes and would do it from a more traditional, “patronizing” approach, having difficulties in respecting clients’ own processes. One key informant noted: “... [the local social housing agency] will call you and tell you: “You must intervene in this situation”, while we think we shouldn’t”.

In contrast, sourcing houses in the private market may facilitate clients’ choice about neighbourhood and features of their home such as size and configuration. Dwellings in the public market tend to be larger and to be in neighbourhoods with a larger concentration of people experiencing social exclusion. One key informant said: “[the local social housing agency] provided the first units available, and although we tried, it was not possible to negotiate [some of the features of the apartments]”.

Barriers for access to social housing, support services, and social benefits were identified in all sites, especially in the case of migrants, who would not be entitled to those benefits. As one key informant noted: “The good thing is that services exist in the communities; the problem comes because clients have barriers to access them. A house is the first facilitator, since people can register there, and that would entitle them to access services. But this doesn’t work for people in an irregular situation”.

Access to social housing was especially challenging for homeless people in Barcelona and Málaga, since they are not an identified priority group in terms of the eligibility criteria for social welfare. As one key informant noted: “there is social housing available, but homelessness is not an access criterion, so clients wouldn’t qualify for it”. The sometimes challenging and long administrative processes to access social benefits or social housing were also identified as negatively affecting programme sustainability, client choice, and their commitment to the recovery process.

The Spanish welfare system offers a wide array of public services which, according to several key informants, adequately address their clients’ support needs. The choice to broker existing public services was a strategic decision taken in the design of the programme, which was motivated mainly by the will to: 1) optimize the HF model so that it would not duplicate existing services, and 2) promote normalized use of the public services by *Hábitat* clients as another community integration tool. As a key informant from the management level stated, “the aim of the programme is to grant *Hábitat* clients with exactly the same access to services as the rest of the population would have”. As in other European countries with similar welfare systems, ICM configuration of intervention teams was chosen in order to create and capitalize on links with existing public services networks (Busch-Geertsema, 2014).

However, the configuration of public services in Spain also created barriers to programme fidelity. Regional governments have control over social, health, education or employment services in Spain. This results in (sometimes wide) differences in the support services available to *Hábitat* clients in different regions. For example, the quality of mental health services provided in the different sites varied from good to poor. As stated by one staff member: “the support services exist in the community; now, the quality of those services is something different...”. Some health and social services needed by *Hábitat* clients would be not sufficiently covered or not covered at all by the Spanish welfare system, such as dentistry or specific community integration services.

The current configuration of the system for social support to people experiencing homelessness may hinder the *Separation of Housing and Services*, since municipalities' outreach teams or emergency services are officially responsible for providing support to people experiencing homelessness who are not enrolled in any type of housing support service. As one key informant noted: "nowadays, the provision of social support to homeless people (not linked to any type of accommodation) is the exclusive responsibility of the local social services". This would imply that clients losing their home would be obliged to receive social support from those local services, not by the *Hábitat* programme.

The international Housing First community developed from European and North American programmes has facilitated Housing First fidelity in the *Hábitat* programme. As one key informant put it: "Being able to discuss the way we did things with people with longer experience with the model validated certain aspects of how we were doing things and guided us in confronting others".

Table 2. Summary of Systemic Facilitators and Barriers for Achieving Housing First Fidelity

Facilitators	Barriers
Political momentum open to new ideas and social awareness on evictions crisis	Regional distribution of competencies for delivering social, health, education and employment services in Spain
Inherent innovation of the HF model as a motivator for users and professionals	Programme dependence on political whims
Both public and private housing have (different) positive elements	Weakness of funding structure and sources of the social sector and services
Spanish welfare system provides a wide array of services and social/housing benefits	Opposition from some organizations within the homelessness sector
Learnings and relations with international community; HF momentum in Europe.	Availability and affordability of housing
	Existing barriers for access to social benefits and public services and unstable social benefits
	Non-existing or non-adequately covered services by the public networks

Organizational facilitators and barriers

Several elements linked to the lack of previous implementation experience with Housing First were mentioned as challenges to the Housing First model fidelity. Some strategic decisions were taken to mitigate possible barriers to implementation in the first stages of the programme, which limited model fidelity on some dimensions such as inclusion of peer support workers. For example, although including peer workers on the team was seen as a valuable element in the recovery process of clients, their inclusion was postponed so that potential management

challenges were avoided. As one key stakeholder expressed it: “the launch of the *Hábitat* programme was difficult enough to add another challenge such as the integration of a peer worker in a team of two people”.

Risk management and an insufficient number of individual housing subsidies were reasons for the decision for RAIS to serve as the lessee on clients’ housing units. In a tight and competitive housing market, it is difficult to convince private landlords to sign a contract with a homeless person with high support needs. The administrative procedures for social housing allocation are protracted and make it difficult for clients to access social housing units. As one team member explained the functioning of the local benefits: “it would usually take up to nine months for someone to start receiving social benefits, and they would receive them for a maximum period of one and a half years. Then he/she would have to apply again, so there would be another nine months with no income at all”.

Lack of experience delivering a Housing First service led to some misinterpretations of the model and omissions in the design of the *Hábitat* programme. Unlike the rest of the services in RAIS, the intervention procedures for *Hábitat* stated that clients’ goals were not to be set forth in writing. The reason for this was that “we wanted to make it clear that this was a radically different programme where clients had total control over the service, and it should not resemble anything of what we did before”. After an initial period of time, the team realized that this decision created problems in the *Service Philosophy* domain, since it created too much subjectivity in what it meant to respect clients’ choices. The intervention procedures were revised so that service providers began to record clients’ goals.

Similarly, one key informant described how unfamiliarity with the programme led to practices that deviated from the model in *Separation of Housing and Services* domain. For example, after 12 months, a service user expressed the intention to leave his home for a rented room that was not covered by the programme, yet he wanted to continue receiving social supports from *Hábitat*. That would add a new client to the service, who would use the empty house, but early exits from the programme had not been anticipated by the programme developers, and therefore, they had not budgeted the provision of supports outside a housing unit. As one of the informants with technical responsibility expressed it: “we did not expect that we were asked to provide social support once a client left the house provided by the programme”.

Key informants identified some core organizational elements that played an essential role in preventing programme drift from the original Housing First model. First, RAIS’ traditional vision and system of values aligned closely with the Housing First person-centred, rights- and recovery-based approach. As a key informant expressed it: “The Housing First values were already in the organization before even

learning about the existence of Housing First”. Consequently, there was a clear commitment of the RAIS Board to the Housing First model and to implementation of the *Hábitat* programme, which cascaded down through the different leadership levels in the organization. Leaders were actively involved in relevant processes of the programme. As one key informant recalled: “We had a situation of domestic violence with one of the clients. The City Council asked us to immediately expel the client from the service, and it was the General Director who answered and claimed that the client was not to be judged by the programme, but that he should be sued and respond to legal consequences”.

Resulting from this multilevel engagement, several informants remarked on the importance of Housing First principles throughout the whole project cycle (programme design, resourcing, delivery and evaluation). This was a facilitator to fidelity in the *Service Philosophy* domain. As one key informant noted: “whenever we found unsolved challenges, we would go to the principles in Sam’s [Tsemberis, 2010] book to find the solution”. The programme design was based on making the Housing First principles operate efficiently in the Spanish context, with close observation of model principles, while also flexibly adjusting to the Spanish welfare system, funding sources, and culture. Staff members explained how teams faced fewer challenges to service delivery in areas where interpretation of the Housing First principles had been easier, since there were clearer responses to those challenges.

Informants also identified some barriers to programme fidelity in the organization’s culture, especially regarding client participation in programme governance, hindering higher fidelity of the *Programme Structure* domain. One key informant said: “Is client participation in *Habitat* different to the participation in other RAIS’ programs? No. Is it something we should address? My opinion is that we should. But this decision should be probably taken by the Board of Directors or the Board of Trustees”. Although as one key informant said: “this is not an issue for this programme, but (...) a usual thing within the social sector in Spain”.

A specific independent structure for the *Hábitat* programme that depends on a national technical coordination was a key facilitator for *Service Philosophy*. This structure provided *Hábitat* with a development framework separate from other services that are based on a staircase model, which are also managed by RAIS. As one key informant said: “the existence of a global technical figure has been important to ensure a coordinated intervention, with respect to the model, training...”. Training sessions and inter-territorial meetings held twice a year were also introduced to improve programme staff understanding and application of Housing First principles and philosophy.

Nevertheless, the territorial structure and the deployment of the programme across geographical distances created some challenges to Housing First fidelity, especially for the domains of *Housing Process and Structure* and *Separation of Housing and Services*. As a key informant put it: “Had we have had the possibility of having 80 clients per site, the client choice options would have been much higher”. Some of these challenges came from within the organization, from technical staff in other services or site coordinators who were reluctant to implement the programme, fearing that Hábitat would take over the existing services and professionals.

The small size of the programme in each site, which was determined by political support and the resources that RAIS managed to obtain, hindered clients’ capacity to choose the neighbourhood and house where they will live. As one key informant expressed it: “We only had 10 houses, so the first client could choose amongst those 10 units, but the last client necessarily had to take the one left”. The programme funding structure also limited the control and election options of clients over the refurbishing and decoration of their homes and affected the *Housing Process and Structure domain*.

The small size of the teams in each site and limited resources also implied that the task of sourcing and managing the housing units was assigned to the ICM teams members. This generated an extra burden for members of staff who didn’t have competencies in these areas. It also put strain on client-staff relationships, since the same person that provided the support was also the one who came to talk about housing issues. This was seen as an obstacle for a higher fidelity on the *Separation of Housing and Services* and the *Service Array* domains. A key informant said: “we definitely realized that we needed to introduce the figures of good cop and bad cop, assumed by site coordinators, when clients were breaching commitments. This may affect the intervention, but still it is the best way I can think of to do it”.

The small size of the teams also implied that the professional working in the smallest site shared her time with other RAIS’ services operating with a staircase model approach. When discussing that situation, key informants expressed an added difficulty to quickly take up the Housing First approach, with comments such as: “it is not the same to have to work part-time in an emergency center and part-time in the Habitat programme than having exclusive dedication for Habitat. (...) That generates some bipolarities in the staff that affect their capacity to have the HF model in mind”.

The lack of mental health professionals on the ICM teams was mentioned by several informants as a barrier to an adequate service delivery in that area. They described how difficult it was for team members to manage clients’ mental health crises and how difficult it was to access public mental health services. As discussed in the

section on systemic facilitators and barriers, the provision of mental health services through the community was a conscious decision of the programme to promote integration. To address the gap, a technical coordinator with expertise in mental health services was hired to provide supervision and support to service professionals in that field.

Team members also mentioned that there was insufficient time for case review during the weekly meetings. As one of them expressed it: “Coordination meetings become very long because there are a lot of cases. Therefore, we have to focus on the crisis and we don’t have the time in the end to discuss prevention or less urgent cases”. To improve this, specific intervention tools have been developed to increase the efficiency of weekly team meetings by structuring the agenda and share case information before the discussions.

When the programme launched, RAIS operated other services different from the *Hábitat* programme and had offices in two of the three programme sites, so the team members had other colleagues from the organization on-site. Today, RAIS operates other services only in approximately half of the sites where Housing First is implemented, so some of the teams have no direct contact with the organization on a regular basis. Team members working in sites where RAIS does not operate expressed a greater sense of solitude and a stronger sense that clients identify individual team members with the whole organization. As one team member put it: “A sense of solitude in professionals is inevitable given the structure of the programme”; “We are the same as RAIS and *Hábitat* for them (the clients). We are the only real thing they see from the organization”.

Team members described this situation as emotionally challenging and affecting their relationships with clients, therefore hindering fidelity on the *Team Structure and Human Resources* domain. Some of these team members felt “abandoned” by the organization, which combined with the high emotional demands of the intervention, may lead to staff burnout. These feelings may also help to explain opposing views regarding care of the team: Some team members complained of “a lack of training and good working conditions. Salaries are higher in other similar services”, whereas others noted that “the organization has made a greater investment in the professionals of *Hábitat* than that we could afford on other services”.

Several key informants identified procedural changes that were introduced to mitigate structural limitations. For example, to increase choice in housing, team members now show clients a dossier of available homes before visiting the apartments or visit the different neighbourhoods so that clients can make informed choices. It is important to note that, while participants in management roles focused on mitigating factors at the organizational level, intervention team members identi-

fied them mostly at the individual level (e.g., competencies and personal characteristics). In any case, it was clear that, for all informants, the organization strives to mitigate effects of these structural factors on model fidelity.

Some staffing and human resources elements were identified as facilitators of programme fidelity and clients' recovery. Several key informants noted that the programme's staff selection process was very effective. Staff competencies, skills and personal characteristics such as resilience, flexibility and empathy were mentioned as key factors that facilitated fidelity to Housing First principles. As one key informant with managing functions said: "the competences and the motivation of the service professionals has been key elements for the launch of the programme. It is important to have staff with good technical competences and experience but who are open to reset how they apply them". Again, the international element appeared to facilitate programme fidelity. Several informants mentioned the involvement of the organization in the Housing First international community as a facilitator of Housing First fidelity and a source of motivation for team members.

Table 3. Summary of Organizational Facilitators and Barriers for Achieving Housing First Fidelity

Facilitators	Barriers
Vision and values aligned with HF principles	No previous experience or reference to HF implementation in the country
Commitment to and observation of HF principles	Pressure on programme to demonstrate the validity of the HF model in Spain
Commitment of leaders to programme	Limitations of the organizational structure and disruption of and independent programme structure
Independent structure for the HF programme within the organization with an own technical coordination	Internal concerns with the model or its deployment within the organization
Attention to learnings and measures to mitigate structural limitations	Structure and size of the programme (small teams scattered in several sites across Spain)
Good profiling and selection of staff	Sense of solitude and lack of organizational care in professionals
Good competencies and personal abilities of professionals	Lack of some specific competencies within the team structure (housing, mental health)
Cohesion and training measures	
Investment in relations with external agents (networks, media, international community)	

Individual facilitators and barriers

Different facets of disruption caused by the Housing First model itself linked to most of the facilitators and barriers for programme fidelity and for the recovery process at the individual level. Regarding clients' factors, several informants mentioned that clients' understanding of choice and control over the service was a key facilitator

for recovery. In many cases, initial client mistrust was transformed into engagement with team members. Based on their experiences of traditional services, new clients worried they would be expelled from the programme if the team members found out they used drugs or alcohol, got involved in a fight, or had issues with the police.

When clients began to understand that these activities would not get them expelled from the programme, both their relationship with the service and their own recovery process improved. However, after some time in the programme, some clients began to get annoyed by visits from team members. Key informants quoted clients saying: "This cannot be forever, I am starting to get tired of these visits" and "Since I do not have to report you on anything I wouldn't like to, I am not telling you not to come, but... why do you come?" Several key informants also mentioned that clients who did not have an income and did not contribute towards the programme felt less engaged with their homes and with the programme. In contrast, those who were further along in their recovery processes took on peer support roles with other clients.

Service professionals' adaptation to the Housing First model was also identified as relevant to programme fidelity. One site manager said that professionals "felt more comfortable with the new intervention approach", which probably helped align the service with the original model. At the same time, it was difficult for some team members to manage several emotional aspects of delivering the new programme, such as the need to be flexible and resilient. One team member noted, "It is difficult to manage when you have been up until 6am because your client's mother died and then you have to get up at 8am because you have an appointment with another client". Others felt they lost professional skills, competencies, and values in the client-oriented context of Housing First. One person described relationships as blurred, "the line between personal and professional in this programme is weak, and that is emotionally exhausting".

Informants also mentioned difficulties with the Housing First approach in interactions with professionals from other services, such as those who referred clients to the programme. These professionals had difficulties in understanding the model, with questions such as: "Well, then if there are no requirements for clients, what will you do with them?" In cases where external services did not accurately explain Housing First to new clients, it affected clients' perception of the *Separation of Housing and Services*. Professionals from community services such as health, addictions, and employment were reluctant to respect clients' choice in services, such as a family doctor who refused to provide medication to clients who were not abstinent.

Key informants described the leadership style as flexible, and empathic, and thus contributing to team cohesiveness. They said they regularly share their views and daily learnings with other colleagues and have discussions about the work they do and how they do it, which fostered shared belief in the model, as expressed by one team member: “I truly believe the model works”. Combined with the team cohesion, the personal commitment and competencies of programme staff also facilitated management of complicated and emotionally difficult situations. As one of the team members put it: “this is all about respecting the clients’ processes, and impatience and frustration come easily, and some personal skills have been essential to maintaining an adequate response”.¹

Table 4. Summary of Individual Facilitators and Barriers for Achieving Housing First Fidelity

Facilitators	Barriers
Users learning process on election and control of the service	Difficulties in users in understanding this new approach (mistrust)
Individual leaderships of some staff and team cohesion	Professionals’ difficulties with the HF approach (feeling of losing competencies, emotionally demanding and requiring resilience and flexibility)
Staff commitment with users and shared belief in the HF model	Professionals’ difficulties with external services and networks with the HF approach Administrative issues in some service users hampering income and bonding to house

Discussion

The fidelity assessment findings seem to reflect the programme’s early stage of implementation and are more closely linked to elements related to design and implementation rather than to client outcomes, as seen in other studies (Nelson *et al.*, 2014; Macnaughton *et al.*, 2015). These findings highlight some actions that the *Hábitat* programme can take to promote and maintain model fidelity. First, some action to remove barriers to benefits and social housing is needed. Lobbying actions directed toward improving the welfare system may be important to removing these barriers. Second, further developing the separation of housing and services

¹ Other external elements at the individual level were mentioned as facilitators to the recovery process. For example, some neighbours developed helping relationships with clients, which facilitated their recovery process. In some cases, service professionals had to advocate on their clients’ behalf to help their new neighbours overcome their prejudices. Clients’ community integration has also been facilitated by having pets that they take to the park, where they meet other members of the community. As one key informant noted: “That thing with dogs is incredible. There are two clients in Madrid for which the dogs have been key facilitators to building relations within the community”.

through the alliance with *Asociación Provienda* would facilitate higher fidelity in the *Housing Process and Structure*, *Separation of Housing and Services* and *Service Array* domains. Third, actions aimed at supporting the small intervention teams scattered across the Spanish geography and that foster greater technical cohesion would facilitate higher fidelity in the *Programme Structure* domain and help maintain a high fidelity in the *Service Philosophy* domain.

As in other European implementations of Housing First, this grassroots implementation of a “disruptive” model faced many obstacles at the systemic level (Lancione *et al.*, 2017). Systemic barriers to programme fidelity included housing policies that would not prioritize homeless people’s access to benefits, unstable funding schemes, and barriers to accessing public services and social benefits.

Challenges at the organizational level came mainly from the disruption generated by the introduction of a radically different intervention approach within the organization. This resulted in a learning-by-doing process of the service design and implementation in which some mistakes were made, and some successes were achieved. The Housing First principles played an essential role in guiding the organization towards an effective programme implementation. Most adaptations were related to the configuration of services and social benefits available in the Spanish welfare system. The key informants’ general perceptions were that these adaptations did not undermine *Hábitat* programme’s capacity to adhere to key principles, a finding consistent with previous research (Pleace and Bretherton, 2013).

Few facilitators of fidelity were found at the systemic level. The Housing First model’s innovative character was mentioned as an essential motivational factor for clients, professionals, and for the organization. Motivation fostered engagement and commitment of the different players with the programme and with the clients’ recovery processes. At the organizational level, values and leadership contributed to fidelity and facilitated effective responses to challenges in ways that accorded with Housing First principles. At the individual level, commitment of the service professionals to the model, and the learning processes of both the clients and the staff facilitated model fidelity and helped staff members overcome systemic and organizational difficulties.

The *Hábitat* programme experienced barriers and facilitators to programme fidelity similar to those found in other fidelity assessments (Greenwood *et al.*, 2013; Macnaughton *et al.*, 2015; Lancione *et al.*, 2017). As in these other studies, *Hábitat* reported a high housing retention rate and increased levels of quality of life for its clients (Bernad *et al.*, 2016b). The findings of this study would indicate that Housing First works even when adapted to different political and social systems, as long as the model’s key principles are adhered to.

Some systemic barriers identified in the fidelity assessment invite us to consider whether systems need to change for Housing First implementations to work in new contexts. For example, the obstacles that RAIS encountered in obtaining housing for its clients were caused by not only by a lack of affordable housing, but also by structural and policy barriers which, if transformed, could redress the housing crisis in Spain.

Limitations

Some issues in the survey translation and adaptation process may have affected the results of the fidelity self-assessment. Most of these issues arose from difficulties in identifying Spanish equivalence to North American terms, such as “promising practice”, “supported education in the community,” and some language used to describe housing subsidies. Solutions were identified through discussion with the research coordinators. Challenges to interpretation also arose in the conciliation meetings, especially in regard to colloquialisms such as ‘quid pro quo’. These challenges were reconciled by the facilitator, who defined and explained the English colloquialisms to participants. Some participants from the intervention teams expressed concerns that the survey did not adequately capture the nuances of their daily work.

Despite these methodological challenges, the assessment process was a valuable opportunity for the organization to reflect on programme fidelity and to identify systemic, organizational and individual factors that affected programme implementation and clients’ recovery experiences. The use of a common assessment methodology and instruments in this research has sparked discussions among different international programmes and will advance our understanding of the different adaptations of the Housing First model across Europe. At this early introduction stage, the possibility of benchmarking the *Hábitat* programme with other European implementations has been very useful for identifying contextual features that affect fidelity and client outcomes.

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